PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax
(571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
TWO EMBARC EIGHTH FLOO	ADERO CENTER R	D AND CREW, L		Certificat	certificate of mailing or transmission. Certificate of Mailing or Transmission tify that this Fee(s) Transmittal is being deposited with the United I Service with sufficient postage for first class mail in an envelope of the Mail Stop ISSUE FEE address above, or being facsimile to the USPTO (571) 273-2885, on the date indicated below.		
	CO, CA 94111-383	,	79\ _			(Depoxitor's name)	
04/03/2008 SDIRE	TA2 00000001 2014	130 10646709APR	0 1 2008)			(Signature)	
01 FC:1501	1440.00 DA	100d0703A11	لق (اق			(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	ATTO	RNEY DOCKET NO.	CONFIRMATION NO.	
10/666,709	09/19/2003		Hiroki Kanai	16	869K-095200US	1998	
	: STORAGE CONTRO UNIT AND PROGRAM		AGE SYSTEM, CONTRO	ol method of stora	GE CONTROL APPAI	ratus,	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1440	\$0	\$1440	\$1440	06/06/2008	
. EXAM	INER	ART UNIT	CLASS-SUBCLASS]			
WALTER,	CRAIG E	2188	711-113000				
FR 1.363). Change of corresponded rest form PTO/SE "Fee Address" indi	moe address or indication ondence address (or Cha 1/122) attached. cation (or "Fee Address' 2 or more recent) attach	nge of Correspondence	2. For printing on the patent front page, list (i) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Hitachi, Ltd. Tokyo, Japan							
lease check the appropri	iate assignee category or	categories (will not be p	rinted on the patent):	Individual Corporat	ion or other private grou	p entity Government	
a. The following fee(s): Issue Fee Publication Fee (N Advance Order - i	o small entity discount p		b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 201430 (enclose an extra copy of this form).				
	tus (from status indicates s SMALL ENTITY state	•	□ h. Applicant is no los	ger claiming SMALL EN	TITY status See 17 CF	R 1 27(a)(2)	
						assignee or other party in	
			. 02100.				
Authorized Signature	/Robei	t C. Colwell/		Date			
Typed or printed name		obert C. Colwell			27.431		
ICAMBUNG, YIIKIING ZZJ	13-1430.		on is required to obtain or 1.14. This collection is es y depending upon the indistrict of the chief Information Offic COMPLETED FORMS Tespond to a collection of in			by the USPTO to process), gathering, preparing, and e you require to complete timent of Commerce, P.O. or Patents, P.O. Box 1450, number.	